

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Smc		1/7/60
O.I.P.E. CLASSIFIER		59	1/7/60
FORMALITY REVIEW		71090	2/9/60
RESPONSE FORMALITY REVIEW		71090	4/13/60

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/10/59
2	✓	✓	3/10/59
3	✓	✓	3/10/59
4	✓	✓	3/10/59
5	✓	✓	3/10/59
6	✓	✓	3/10/59
7	✓	✓	3/10/59
8	✓	✓	3/10/59
9	✓	✓	3/10/59
10	✓	✓	3/10/59
11	✓	✓	3/10/59
12	✓	✓	3/10/59
13	✓	✓	3/10/59
14	✓	✓	3/10/59
15	✓	✓	3/10/59
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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